

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments

over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer
Address:

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
(Required by 11 U.S.C. § 110.)

X

Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

Certificate of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Harris, Debra A

Printed Name(s) of Debtor(s)

X /s/ Debra A Harris

Signature of Debtor

12/17/2008

Date

Case No. (if known) _____

X

Signature of Joint Debtor (if any)

Date

United States Bankruptcy Court Northern District of Illinois		Voluntary Petition																					
Name of Debtor (if individual, enter Last, First, Middle): Harris, Debra A	Name of Joint Debtor (Spouse) (Last, First, Middle):																						
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):																						
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 7332	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):																						
Street Address of Debtor (No. & Street, City, State & Zip Code): 2131 119th St # 104 Blue Island, IL	Street Address of Joint Debtor (No. & Street, City, State & Zip Code):																						
ZIPCODE 60406-1249	ZIPCODE																						
County of Residence or of the Principal Place of Business: Cook	County of Residence or of the Principal Place of Business:																						
Mailing Address of Debtor (if different from street address)	Mailing Address of Joint Debtor (if different from street address):																						
ZIPCODE	ZIPCODE																						
Location of Principal Assets of Business Debtor (if different from street address above):																							
ZIPCODE																							
Type of Debtor (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 12 <input checked="" type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding																					
Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).			Nature of Debts (Check one box.) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.																				
Filing Fee (Check one box)		Chapter 11 Debtors																					
<input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2,190,000. Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).																					
Statistical/Administrative Information																							
<input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.																							
THIS SPACE IS FOR COURT USE ONLY																							
Estimated Number of Creditors <table border="1"> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>1-49</td> <td>50-99</td> <td>100-199</td> <td>200-999</td> <td>1,000- 5,000</td> <td>5,001- 10,000</td> <td>10,001- 25,000</td> <td>25,001- 50,000</td> <td>50,001- 100,000</td> <td>Over 100,000</td> </tr> </table>				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-49	50-99	100-199	200-999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	Over 100,000
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>														
1-49	50-99	100-199	200-999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	Over 100,000														
Estimated Assets <table border="1"> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>														
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion														
Estimated Liabilities <table border="1"> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>														
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion														

Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): Harris, Debra A
Prior Bankruptcy Case Filed Within Last 8 Years (If more than two, attach additional sheet)		
Location Where Filed: ND Of IL	Case Number: 07-01218	Date Filed: 1/24/07
Location Where Filed: N/A	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)		
Name of Debtor: None	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		X /s/ Troy L Gleason <small>Signature of Attorney for Debtor(s)</small>
		12/17/08 <small>Date</small>
Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No		
Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.		
If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.		
Information Regarding the Debtor - Venue <small>(Check any applicable box.)</small>		
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.		
Certification by a Debtor Who Resides as a Tenant of Residential Property <small>(Check all applicable boxes.)</small>		
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)		
<hr/> <small>(Name of landlord or lessor that obtained judgment)</small> <hr/> <small>(Address of landlord or lessor)</small>		
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).		

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Harris, Debra A**Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Debra A Harris

Signature of Debtor

Debra A Harris**X**

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

December 17, 2008

Date

Signature of Attorney***X /s/ Troy L Gleason**

Signature of Attorney for Debtor(s)

Troy L Gleason 6276510
Gleason & Gleason
77 W Washington, Ste 1218
Chicago, IL 60602
(312) 578-9530 Fax: (312) 578-9524
troy@chicagobk.com

December 17, 2008

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.)

- I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
- Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A *bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.*

IN RE:

Harris, Debra A

Debtor(s)

Case No. _____

Chapter 13

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE
WITH CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Debra A Harris

Date: December 17, 2008

IN RE:

Harris, Debra A

Debtor(s)

Case No. _____

Chapter **13**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 0.00		
B - Personal Property	Yes	3	\$ 1,725.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	3		\$ 22,167.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 1,247.89
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 1,147.00
TOTAL		14	\$ 1,725.00	\$ 22,167.00	

IN RE:

Case No. _____

Harris, Debra A

Chapter **13**

Debtor(s)

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the following:

Average Income (from Schedule I, Line 16)	\$ 1,247.89
Average Expenses (from Schedule J, Line 18)	\$ 1,147.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 1,586.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column	\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column	\$ 0.00
4. Total from Schedule F	\$ 22,167.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)	\$ 22,167.00

Debtor(s)

(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				
				TOTAL 0.00

(Report also on Summary of Schedules)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Cash on Hand		50.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking account		100.00
3. Security deposits with public utilities, telephone companies, landlords, and others.		Savings Account		0.00
4. Household goods and furnishings, include audio, video, and computer equipment.		Security Deposit w/ Landlord - \$ - No value to the Debtor		0.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		Household goods, including but not limited to: TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances.		1,000.00
6. Wearing apparel.		Books, Pictures, and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles		250.00
7. Furs and jewelry.		Used Clothing		250.00
8. Firearms and sports, photographic, and other hobby equipment.		Misc Costume Jewelry		75.00
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X	Term life thru work - no cash value		0.00
10. Annuities. Itemize and name each issue.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		401(k) with current employer - 100% Exempt		0.00
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			

IN RE Harris, Debra A

Case No. _____

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.	X			
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			

IN RE Harris, Debra A

Case No. _____

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not already listed. Itemize.	X X X			

TOTAL **1,725.00**(Include amounts from any continuation sheets attached.
Report total also on Summary of Schedules.)

IN RE Harris, Debra A

Debtor(s)

Case No.

(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:
(Check one box)

- 11 U.S.C. § 522(b)(2)
 11 U.S.C. § 522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL			UNSECURED PORTION, IF ANY
			CONTINGENT	UNLIQUIDATED	DISPUTED	
ACCOUNT NO.		Value \$				
ACCOUNT NO.		Value \$				
ACCOUNT NO.		Value \$				
ACCOUNT NO.		Value \$				
			Subtotal (Total of this page)	\$	\$	
			Total (Use only on last page)	\$	\$	

0 continuation sheets attached

Subtotal
(Total of this page)

Total
(Use only on last page)

(Report also on
Summary of
Schedules.)

(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

 Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

 Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

 Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 Deposits by individuals

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

 Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

 Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Affinity Cash Loans 16537 W 159th St Lockport, IL 60441-7900		loan				300.00
ACCOUNT NO. 0229 Afni, Inc. PO Box 3097 Bloomington, IL 61702-3097		Open account opened 6/08				661.00
ACCOUNT NO. Us Cellular		Assignee or other notification for: Afni, Inc.				
ACCOUNT NO. 6191 Bank Of America PO Box 1598 Norfolk, VA 23501-1598		Revolving account opened 4/01				1,530.00
2 continuation sheets attached			Subtotal (Total of this page)	\$	2,491.00	
			Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$		

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. Com Ed Customer Care Center PO Box 805379 Chicago, IL 60680-5379		Utility or Cellular Service			824.00
ACCOUNT NO. 5441 Consumer Portfolio Services PO Box 57071 Irvine, CA 92619-7071		Auto Lien			12,189.00
ACCOUNT NO. 8733 Crd Prt Asso One Galleria Tower Dallas, TX 75240					378.00
ACCOUNT NO. Comcast		Assignee or other notification for: Crd Prt Asso			
ACCOUNT NO. 7040 Progressive Mgmt Syste 1521 W Cameron Ave Fl 1 West Covina, CA 91790-2738		Open account opened 6/08			1,249.00
ACCOUNT NO. Sprint/united Management Compa		Assignee or other notification for: Progressive Mgmt Syste			
ACCOUNT NO. 6124 Progressive Mgmt Syste 1521 W Cameron Ave Fl 1 West Covina, CA 91790-2738		Open account opened 5/08			782.00
Sheet no. 1 of 2 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 15,422.00	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. Sprint/united Management Compa		Assignee or other notification for: Progressive Mgmt Syste			
ACCOUNT NO. 1527 Salute/utb PO Box 105555 Atlanta, GA 30348-5555		Revolving account opened 6/08			583.00
ACCOUNT NO. 5868 Us Bank PO Box 5227 Cincinnati, OH 45201-5227		Installment account opened 2/04			1,942.00
ACCOUNT NO. 0001 Verizon Wireless/great 1515 E Woodfield Rd Ste 140 Schaumburg, IL 60173-6046		Open account opened 7/07			1,729.00
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
Sheet no. <u>2</u> of <u>2</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 4,254.00	
			Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$ 22,167.00	

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status Single	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S):	AGE(S): 14
EMPLOYMENT:	DEBTOR	SPOUSE
Occupation Clerk		
Name of Employer Amico Educational Concepts		
How long employed 6 years		
Address of Employer 4731 W 136th St Crestwood, IL 60445		

INCOME: (Estimate of average or projected monthly income at time case filed)

	DEBTOR	SPOUSE
1. Current monthly gross wages, salary, and commissions (prorate if not paid monthly)	\$ 1,586.00	\$ _____
2. Estimated monthly overtime	\$ _____	\$ _____

3. SUBTOTAL

4. LESS PAYROLL DEDUCTIONS	\$ 338.11	\$ _____
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a. Payroll taxes and Social Security	\$ _____	\$ _____
b. Insurance	\$ _____	\$ _____
c. Union dues	\$ _____	\$ _____
d. Other (specify) _____	\$ _____	\$ _____

5. SUBTOTAL OF PAYROLL DEDUCTIONS**6. TOTAL NET MONTHLY TAKE HOME PAY**

7. Regular income from operation of business or profession or farm (attach detailed statement)	\$ _____	\$ _____
8. Income from real property	\$ _____	\$ _____
9. Interest and dividends	\$ _____	\$ _____
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$ _____	\$ _____
11. Social Security or other government assistance (Specify) _____	\$ _____	\$ _____
12. Pension or retirement income	\$ _____	\$ _____
13. Other monthly income (Specify) _____	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____

14. SUBTOTAL OF LINES 7 THROUGH 13**15. AVERAGE MONTHLY INCOME** (Add amounts shown on lines 6 and 14)

16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)	\$ 1,247.89
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(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:
None

IN RE Harris, Debra A

Debtor(s)

Case No.

(If known)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$ 600.00
a. Are real estate taxes included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
b. Is property insurance included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
2. Utilities:	
a. Electricity and heating fuel	\$ 100.00
b. Water and sewer	\$
c. Telephone	\$ 30.00
d. Other _____	\$
3. Home maintenance (repairs and upkeep)	\$
4. Food	\$ 290.00
5. Clothing	\$ 11.00
6. Laundry and dry cleaning	\$ 11.00
7. Medical and dental expenses	\$ 5.00
8. Transportation (not including car payments)	\$ 100.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$
10. Charitable contributions	\$
11. Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner's or renter's	\$
b. Life	\$
c. Health	\$
d. Auto	\$
e. Other _____	\$
12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) _____	\$
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$
b. Other _____	\$
14. Alimony, maintenance, and support paid to others	\$
15. Payments for support of additional dependents not living at your home	\$
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$
17. Other _____	\$

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$ 1,147.00

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:
None

20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$ 1,247.89
b. Average monthly expenses from Line 18 above	\$ 1,147.00
c. Monthly net income (a. minus b.)	\$ 100.89

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 16 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: December 17, 2008

Signature: /s/ Debra A Harris
Debra A Harris

Debtor

Date: _____ Signature: _____

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the _____ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the _____ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date: _____ Signature: _____

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

IN RE:

Harris, Debra A

Debtor(s)

Case No. _____

Chapter 13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
1,586.00	2008 Income from employment (monthly)
13,118.00	2007 Income from employment
16,977.00	2006 Income from employment

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND
VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN
WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

**06 Dodge Startus Totalled in
accident - no insurance at time of
accident**

9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

10. Other transfers

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

None If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

“Environmental Law” means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

“Site” means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

“Hazardous Material” means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: December 17, 2008

Signature /s/ Debra A Harris
of Debtor

Debra A Harris

Date: _____

Signature _____
of Joint Debtor
(if any)

_____ 0 continuation pages attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

IN RE:

Harris, Debra A

Debtor(s)

Case No. _____

Chapter 13

VERIFICATION OF CREDITOR MATRIX

Number of Creditors 10

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: December 17, 2008

/s/ Debra A Harris

Debtor

Joint Debtor

Harris, Debra A
2131 119th St # 104
Blue Island, IL 60406-1249

Us Bank
PO Box 5227
Cincinnati, OH 45201-5227

Gleason & Gleason
77 W Washington, Ste 1218
Chicago, IL 60602

Verizon Wireless/great
1515 E Woodfield Rd Ste 140
Schaumburg, IL 60173-6046

Affinity Cash Loans
16537 W 159th St
Lockport, IL 60441-7900

Afni, Inc.
PO Box 3097
Bloomington, IL 61702-3097

Bank Of America
PO Box 1598
Norfolk, VA 23501-1598

Com Ed
Customer Care Center
PO Box 805379
Chicago, IL 60680-5379

Consumer Portfolio Services
PO Box 57071
Irvine, CA 92619-7071

Crd Prt Asso
One Galleria Tower
Dallas, TX 75240

Progressive Mgmt Syste
1521 W Cameron Ave Fl 1
West Covina, CA 91790-2738

Salute/utb
PO Box 105555
Atlanta, GA 30348-5555

IN RE:

Harris, Debra A

Debtor(s)

Case No. _____

Chapter 13

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ 3,500.00

Prior to the filing of this statement I have received \$ _____

Balance Due \$ 3,500.00

2. The source of the compensation paid to me was: Debtor Other (specify): _____
3. The source of compensation to be paid to me is: Debtor Other (specify): _____
4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
 - e. [Other provisions as needed]
6. By agreement with the debtor(s), the above disclosed fee does not include the following services:
Litigation / Adversary Proceedings
Credit Counseling Fees

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

December 17, 2008

Date

/s/ Troy L Gleason

Troy L Gleason 6276510
Gleason & Gleason
77 W Washington, Ste 1218
Chicago, IL 60602
(312) 578-9530 Fax: (312) 578-9524
troy@chicagobk.com

AMICO EDUCATIONAL CONCEPTS INC Case 0833446 Doc 1 Filed 12/17/08 Entered 12/17/08 10:36:03 Desc Main Document 153 of 153 Page 31 of 59

11/16/2010 7919101391

DATE CHECK NO.

PAY TO THE
ORDER OF

DEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

VOID AFTER 180 days

VOID

AMOUNT

VOID**THIS IS NOT A CHECK****VOID****THIS IS NOT A CHECK**
BANK OF AMERICA PAYABLE IF DESIRED AT:
ALL BANK OF AMERICA BANKS DEPOSIT ACCOUNT DEPOSIT AMOUNT
761538545 *****661.86

** Non Negotiable **

AUTHORIZED SIGNATURE(S)

TO VERIFY AUTHENTICITY OF THIS DOCUMENT, THE BACK CONTAINS HEAT SENSITIVE INK THAT CHANGES FROM BLUE TO CLEAR AND ALSO CONTAINS AN ARTIFICIAL WATERMARK WHICH CAN BE VIEWED WHEN HELD AT AN ANGLE

			FOLD AND REMOVE				
YOUR BANKING ITEM	AMOUNT	DEPOSIT TO ACCT #	EARNINGS	HOURS	RATE	AMOUNT	YTD AMOUNT
NET	661.86	761538545	REGULAR OVERTIME	79.15 10.35	9.500 14.250	751.93 147.50	

TOTAL EARNINGS 899.43 14275.30

EMPLOYER INFORMATION	FILING STATUS	TAX TYPE	AMOUNT	YTD AMOUNT
AMICO EDUCATIONAL CONCEPTS INC 4731 W 136TH ST CRESTWOOD,IL 60445	S 00	SOC SEC MEDICARE FEDERAL IL	55.76 13.04 98.17 25.63	885.09 206.99 1500.34 425.91

PAY PERIOD 09/13/08 TO 09/26/08
CHECK DATE 10/03/08 CHECK # 7919101391

TOTAL WITHHOLDINGS	192.60	3018.33
ADJUSTMENTS	AMOUNT	YTD AMOUNT
MISC DED PX401EEP PX401ERMAT	44.97 - 35.98	150.00 - 178.44 - 62.76

PERSONAL INFORMATION
DEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

TOTAL ADJUSTMENTS 44.97-

SS# XXX-XX-7332 EMPL# 000045 DEPT# 000100

NET PAY 661.86 11028.53

Printed by Paycomix, Inc.

0852 P505 0011 000100

Case 08-34467 Doc 1 Filed 12/17/08 Entered 12/17/08 10:36:03 Desc Main Document Page 32 of 59 7919101440
AMICO EDUCATIONAL CONCEPTS INC
 4731 W 136TH ST
 CRESTWOOD, IL 60445

153-00505-000100
 DATE 12/17/08
 112
 CHECK NO.

Payrolls by Paycom, Inc.

PAY TO THE
 ORDER OF

DEBRA A HARRIS
 2131 W 119TH ST
 BLUE ISLAND IL 60406

VOID AFTER 180 days

VOID
 AMOUNT

VOID**THIS IS NOT A CHECK****VOID****THIS IS NOT A CHECK**
BANK OF AMERICA
 PAYABLE IF DESIRED AT: DEPOSIT ACCOUNT DEPOSIT AMOUNT
 ALL BANK OF AMERICA BANKS 761538545 *****536.81

** Non Negotiable **

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FOLD AND REMOVE

FOLD AND REMOVE

YOUR BANKING

ITEM	AMOUNT	DEPOSIT TO ACCT #	EARNINGS	HOURS	RATE	AMOUNT	YTD AMOUNT
NET	536.81	761538545	REGULAR	75.94	9.500	721.43	

EMPLOYER INFORMATION		TOTAL EARNINGS	721.43	15718.92	
		FILING STATUS	TAX TYPE	AMOUNT	YTD AMOUNT
AMICO EDUCATIONAL CONCEPTS INC 4731 W 136TH ST CRESTWOOD, IL 60445		S 00	SOC SEC MEDICARE FEDERAL IL	44.73 10.46 72.80 20.56	974.60 227.92 1646.05 467.05

PAY PERIOD 10/11/08 TO 10/24/08
 CHECK DATE 10/31/08 CHECK # 7919101440

PERSONAL INFORMATION		TOTAL WITHHOLDINGS	148.55	3315.62
		ADJUSTMENTS	AMOUNT	YTD AMOUNT
DEBRA A HARRIS 2131 W 119TH ST BLUE ISLAND IL 60406		MISC DED PX401EEPRE OTHER COMP PX401ERMAT	36.07 28.86	150.00 150.62 120.51

SS# XXX-XX-7332 EMPL# 000045 DEPT# 000100

TOTAL ADJUSTMENTS 36.07-

Payrolls by Paycom, Inc.

PAY TO THE
ORDER OFDEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

VOID AFTER 180 days

VOID

AMOUNT

VOID**THIS IS NOT A CHECK****VOID****THIS IS NOT A CHECK**

BANK OF AMERICA
PAYABLE IF DESIRED AT: DEPOSIT ACCOUNT DEPOSIT AMOUNT
ALL BANK OF AMERICA BANKS 761538545 *****537.34

** Non Negotiable **

AUTHORIZED SIGNATURE(S)

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FOLD AND REMOVE

		EARNINGS	HOURS	RATE	AMOUNT	YTD AMOUNT		
YOUR BANKING	ITEM NET	AMOUNT 537.34	DEPOSIT TO ACCT # 761538545	REGULAR	76.02	9.500	722.19	

		TOTAL EARNINGS				
EMPLOYER INFORMATION		722.19			14997.49	
AMICO EDUCATIONAL CONCEPTS INC 4731 W 136TH ST CRESTWOOD, IL 60445	FILING STATUS	S 00	TAX TYPE	SOC SEC MEDICARE FEDERAL IL	AMOUNT 44.78 10.47 72.91 20.58	YTD AMOUNT 929.87 217.46 1573.25 446.49

PAY PERIOD 09/27/08 TO 10/10/08
CHECK DATE 10/17/08 CHECK # 7919101415

		TOTAL WITHHOLDINGS			
PERSONAL INFORMATION		148.74			3167.07
DEBRA A HARRIS 2131 W 119TH ST BLUE ISLAND IL 60406	ADJUSTMENTS	MISC DED PX401EEPRE OTHER COMP	AMOUNT 36.11 - 28.89		YTD AMOUNT 150.00 - 114.55 - 91.65

SS# XXX-XX-7332 EMPL# 000045 DEPT# 000100

TOTAL ADJUSTMENTS 36.11-

Payrolls by Paychex, Inc.
#P505 0010 000100

NET PAY 537.34 11565.87

PAY TO THE
ORDER OF

DEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

VOID AFTER 180 days

VOID

AMOUNT

VOID**THIS IS NOT A CHECK****VOID****THIS IS NOT A CHECK**

BANK OF AMERICA DEPOSIT ACCOUNT DEPOSIT AMOUNT
SOUTH PORTLAND, ME 761538545 *****502.32

** Non Negotiable **

AUTHORIZED SIGNATURE(S)

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FOLD AND REMOVE

FOLD AND REMOVE

YOUR BANKING	ITEM	AMOUNT	DEPOSIT TO ACCT #	EARNINGS	HOURS	RATE	AMOUNT	YTD AMOUNT
	NET	502.32	761538545	REGULAR REGULAR	6.00 60.67	9.500 9.500	57.00 578.27	

TOTAL EARNINGS 635.27 1196.82

EMPLOYER INFORMATION	FILING STATUS	TAX TYPE	AMOUNT	YTD AMOUNT
AMICO EDUCATIONAL CONCEPTS INC 4731 W 136TH ST CRESTWOOD, IL 60445	S 00	SOC SEC MEDICARE FEDERAL IL	39.39 9.21 65.29 19.06	74.21 17.35 119.52 35.91

PAY PERIOD 01/05/08 TO 01/18/08
CHECK DATE 01/25/08 CHECK # 7919100907

TOTAL WITHHOLDINGS 132.95 246.99

PERSONAL INFORMATION	ADJUSTMENTS	AMOUNT	YTD AMOUNT
DEBRA A HARRIS 2131 W 119TH ST BLUE ISLAND IL 60406			

SS# XXX-XX-7332 EMPL# 000045 DEPT# 000100

Payments to: Debra A. Harris
0052 3428 0011 000100 NET PAY 502.32 949.83

DATE 12/08/08 CHECK NO.

PAY TO THE
ORDER OFDEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

VOID AFTER 180 days

VOID

AMOUNT

ONE SIDE ONLY

VOID**THIS IS NOT A CHECK****VOID****THIS IS NOT A CHECK**

BANK OF AMERICA
SOUTH PORTLAND, ME

DEPOSIT ACCOUNT 761538545 DEPOSIT AMOUNT *****527.25

** Non Negotiable **

AUTHORIZED SIGNATURE(S)

TO VERIFY AUTHENTICITY OF THIS DOCUMENT THE BACK CONTAINS HEAT SENSITIVE INK THAT CHANGES FROM BLUE TO CLEAR AND ALSO CONTAINS AN ARTIFICIAL WATERMARK WHICH CAN BE VIEWED WHEN HELD AT AN ANGLE

FOLD AND REMOVE			FOLD AND REMOVE		
YOUR BANKING	ITEM	AMOUNT	DEPOSIT TO ACCT #	EARNINGS	HOURS RATE
	NET	527.25	761538545	REGULAR	70.40 9.500
					AMOUNT YTD AMOUNT
					668.80 1865.62

EMPLOYER INFORMATION			TOTAL EARNINGS		
AMICO EDUCATIONAL CONCEPTS INC 4731 W 136TH ST CRESTWOOD, IL 60445			668.80 1865.62		
FILING STATUS	TAX TYPE	AMOUNT	YTD AMOUNT		
S 00	SOC SEC MEDICARE FEDERAL IL	41.47 9.70 70.32 20.06	115.68 27.05 189.84 55.97		

PAY PERIOD 01/19/08 TO 02/01/08
CHECK DATE 02/08/08 CHECK # 7919100933

PERSONAL INFORMATION			TOTAL WITHHOLDINGS		
DEBRA A HARRIS 2131 W 119TH ST BLUE ISLAND IL 60406			141.55 388.54		
SS# XXX-XX-7332 EMPL# 000045 DEPT# 000100			ADJUSTMENTS	AMOUNT	YTD AMOUNT

NET PAY 527.25 1477.08

PAY TO THE
ORDER OF

DEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

VOID AFTER 180 days

VOID

AMOUNT:

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BANK OF AMERICA DEPOSIT ACCOUNT DEPOSIT AMOUNT
SOUTH PORTLAND, ME 761538545 *****623.67

** Non Negotiable **

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ITEM	AMOUNT	DEPOSIT TO ACCT #	EARNINGS	HOURS	RATE	AMOUNT	YTD AMOUNT
NET	623.67	761538545	HOLIDAY	3.00	9.500	28.50	
			REGULAR	73.05	9.500	693.98	
			PERSONAL TIME	8.00	9.500	76.00	

TOTAL EARNINGS 798.48 4680.49

EMPLOYER INFORMATION
AMICO EDUCATIONAL CONCEPTS INC
4731 W 136TH ST
CRESTWOOD, IL 60445

FILING STATUS	TAX TYPE	AMOUNT	YTD AMOUNT
S 00	SOC SEC	49.51	290.20
S 00	MEDICARE	11.58	67.86
S 00	FEDERAL	89.77	492.07
S 00	IL	23.95	140.41

PAY PERIOD 03/15/08 TO 03/28/08
CHECK DATE 04/04/08 CHECK # 7919101040

PERSONAL INFORMATION
DEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

ADJUSTMENTS	AMOUNT	YTD AMOUNT
PERS MEMO	8.00	

SS# XXX-XX-7332 EMPL# 000045 DEPT# 000100

NET PAY 623.67 3689.95

0062 3428 0011 000100

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153-0153 01101000 7919101123

DATE

CHECK NO.

PAY TO THE
ORDER OF

DEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

VOID AFTER 180 days

VOID

AMOUNT

Payables by Payee Inc.

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BANK OF AMERICA
SOUTH PORTLAND, ME
DEPOSIT ACCOUNT 761538545
DEPOSIT AMOUNT *****571.19

** Non Negotiable **

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FOLD AND REMOVE

ITEM NET	AMOUNT 571.19	DEPOSIT TO ACCT # 761538545	EARNINGS REGULAR	HOURS 76.62	RATE 9.500	AMOUNT 727.89	YTD AMOUNT 7245.59
-------------	------------------	--------------------------------	---------------------	----------------	---------------	------------------	-----------------------

TOTAL EARNINGS 727.89 7245.59

EMPLOYER INFORMATION
AMICO EDUCATIONAL CONCEPTS INC
4731 W 136TH ST
CRESTWOOD, IL 60445

FILING STATUS S 00	TAX TYPE SOC SEC MEDICARE FEDERAL IL	AMOUNT 45.13 10.55 79.18 21.84	YTD AMOUNT 449.24 105.05 757.64 217.37
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PAY PERIOD 04/26/08 TO 05/09/08
CHECK DATE 05/16/08 CHECK # 7919101123

TOTAL WITHHOLDINGS	156.70	1529.30
ADJUSTMENTS	AMOUNT	YTD AMOUNT
	PERS MEMO	8.00

PERSONAL INFORMATION
DEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

SS# XXX-XX-7332 EMPL# 000045 DEPT# 000100

NET PAY 571.19 5716.29

Printed by Payables by Payee Inc.

0052 3428 0012 000100

1530153 38/1200 7919101180

112 DATE CHECK NO.

PAY TO THE
ORDER OF

DEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

VOID AFTER 180 days

VOID

AMOUNT

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BANK OF AMERICA
SOUTH PORTLAND, ME
DEPOSIT ACCOUNT 761538545 DEPOSIT AMOUNT *****464.53

** Non Negotiable **

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YOUR BANKING

ITEM	AMOUNT	DEPOSIT TO ACCT #	EARNINGS	HOURS	RATE	AMOUNT	YTD AMOUNT
NET	464.53	761538545	HOLIDAY	8.00	9.500	76.00	
			REGULAR	53.52	9.500	508.44	

TOTAL EARNINGS 584.44 8497.31

EMPLOYER INFORMATION
AMICO EDUCATIONAL CONCEPTS INC
4731 W 136TH ST
CRESTWOOD, IL 60445

FILING STATUS	TAX TYPE	AMOUNT	YTD AMOUNT
S 00	SOC SEC	36.24	526.85
S 00	MEDICARE	8.47	123.20
	FEDERAL	57.67	885.40
	IL	17.53	254.92

PAY PERIOD 05/24/08 TO 06/06/08
CHECK DATE 06/13/08 CHECK # 7919101180

TOTAL WITHHOLDINGS 119.91 1790.37

PERSONAL INFORMATION
DEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

ADJUSTMENTS	AMOUNT	YTD AMOUNT
PERS MEMO	8.00	

SS# XXX-XX-7332 EMPL# 000045 DEPT# 000100

NET PAY 464.53 6706.94

Payrolls by Paychex, Inc.

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153 10/16/08 7919101233
112 DATE CHECK NO.

PAY TO THE
ORDER OF

DEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

VOID AFTER 180 days
VOID
AMOUNT

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BANK OF AMERICA DEPOSIT ACCOUNT 761538545 DEPOSIT AMOUNT *****566.23
SOUTH PORTLAND,ME

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YOUR BANKING		EARNINGS	HOURS	RATE	AMOUNT	YTD AMOUNT
ITEM	AMOUNT	DEPOSIT TO ACCT #	HOLIDAY	8.00	9.500	76.00
NET	566.23	761538545	REGULAR	67.92	9.500	645.24

EMPLOYER INFORMATION		TOTAL EARNINGS	721.24	9930.77	
AMICO EDUCATIONAL CONCEPTS INC	4731 W 136TH ST	FILING STATUS	TAX TYPE	AMOUNT	YTD AMOUNT
CRESTWOOD,IL 60445	\$ 00	SOC SEC	44.72	615.73	
	\$ 00	MEDICARE	10.46	143.99	
		FEDERAL	78.19	1040.42	
		IL	21.64	297.93	

PAY PERIOD 06/21/08 TO 07/04/08
CHECK DATE 07/11/08 CHECK # 7919101233

PERSONAL INFORMATION		TOTAL WITHHOLDINGS	155.01	2098.07
DEBRA A HARRIS	2131 W 119TH ST	ADJUSTMENTS	AMOUNT	YTD AMOUNT
BLUE ISLAND IL 60406		PERS MEMO	8.00	

SS# XXX-XX-7332 EMPL# 000045 DEPT# 000100

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0652 P505 0013 000100

NET PAY

566.23 7832.70

PAY TO THE
ORDER OF

DEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

VOID AFTER 180 days

VOID

AMOUNT

Payroll AD Systems Inc.

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BANK OF AMERICA DEPOSIT ACCOUNT DEPOSIT AMOUNT
SOUTH PORTLAND, ME 761538545 *****659.53

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YOUR BANKING	ITEM NET	AMOUNT	DEPOSIT TO ACCT #	EARNINGS	HOURS	RATE	AMOUNT	YTD AMOUNT
		559.53	761538545	REGULAR	74.97	9.500	712.22	

EMPLOYER INFORMATION	FILING STATUS	TAX TYPE	AMOUNT	YTD AMOUNT
AMICO EDUCATIONAL CONCEPTS INC 4731 W 136TH ST CRESTWOOD, IL 60445	S 00	SOC SEC MEDICARE FEDERAL IL	44.16 10.33 76.83 21.37	571.01 133.53 962.23 276.29

PAY PERIOD 06/07/08 TO 06/20/08
CHECK DATE 06/27/08 CHECK # 7919101207

PERSONAL INFORMATION	ADJUSTMENTS	AMOUNT	YTD AMOUNT
DEBRA A HARRIS 2131 W 119TH ST BLUE ISLAND IL 60406	PERS MEMO		6.00

SS# XXX-XX-7332 EMPL# 000045 DEPT# 000100

0852 P505 0012 000100 NET PAY 559.53 7266.47

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PAY TO THE
ORDER OFDEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

VOID AFTER 180 days

VOID

AMOUNT

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VOID**THIS IS NOT A CHECK****VOID****THIS IS NOT A CHECK**
BANK OF AMERICA DEPOSIT ACCOUNT DEPOSIT AMOUNT
SOUTH PORTLAND, ME 761538545 *****565.33

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YOUR BANKING	ITEM	AMOUNT	DEPOSIT TO ACCT #	EARNINGS	HOURS	RATE	AMOUNT	YTD AMOUNT
	NET	565.33	761538545	REGULAR	75.79	9.500	720.01	

EMPLOYER INFORMATION	TOTAL EARNINGS	AMOUNT	YTD AMOUNT
AMICO EDUCATIONAL CONCEPTS INC 4731 W 136TH ST CRESTWOOD, IL 60445	720.01	10650.78	
	SOC SEC	44.64	660.37
	MEDICARE	10.44	154.43
	FEDERAL	78.00	1118.42
	IL	21.60	319.53

PAY PERIOD 07/05/08 TO 07/18/08
CHECK DATE 07/25/08 CHECK # 7919101259

PERSONAL INFORMATION	TOTAL WITHHOLDINGS	AMOUNT	YTD AMOUNT
DEBRA A HARRIS 2131 W 119TH ST BLUE ISLAND IL 60406	154.68	2252.75	
	PERS MEMO	8.00	

SS# XXX-XX-7332 EMPL# 000045 DEPT# 000100

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NET PAY 565.33 8398.03

PAY TO THE
ORDER OF

DEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

VOID AFTER 180 days
VOID
AMOUNT

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BANK OF AMERICA
SOUTH PORTLAND, ME
DEPOSIT ACCOUNT 761538545 DEPOSIT AMOUNT *****486.78

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YOUR BANKING

ITEM NET	AMOUNT 486.78	DEPOSIT TO ACCT # 761538545	EARNINGS REGULAR	HOURS 64.67	RATE 9.500	AMOUNT 614.37	YTD AMOUNT 11990.48
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EMPLOYER INFORMATION	FILING STATUS	TAX TYPE	AMOUNT	YTD AMOUNT
AMICO EDUCATIONAL CONCEPTS INC 4731 W 136TH ST CRESTWOOD, IL 60445	S 00	SOC SEC MEDICARE FEDERAL IL	38.09 8.91 62.16 18.43	743.43 173.86 1259.38 359.72

PAY PERIOD 08/02/08 TO 08/15/08
CHECK DATE 08/22/08 CHECK # 7919101311

PERSONAL INFORMATION	TOTAL EARNINGS	ADJUSTMENTS	AMOUNT	YTD AMOUNT
DEBRA A HARRIS 2131 W 119TH ST BLUE ISLAND IL 60406	614.37		127.59	2536.39

SS# XXX-XX-7332 EMPL# 000045 DEPT# 000100

Paycheck by Paycheck, Inc.

0852 P505 0013 000100

NET PAY 486.78 9454.09

151.000

112 10/03/08

DATE

7919101391
CHECK NO.PAY TO THE
ORDER OFDEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

VOID AFTER 180 days

VOID

AMOUNT

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BANK OF AMERICA PAYABLE IF DESIRED AT:
ALL BANK OF AMERICA BANKS DEPOSIT ACCOUNT 761538545 DEPOSIT AMOUNT *****661.86

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YOUR BANKING ITEM	AMOUNT	DEPOSIT TO ACCT #	EARNINGS	HOURS	RATE	AMOUNT	YTD AMOUNT
NET	661.86	761538545	REGULAR OVERTIME	79.15 10.35	9.500 14.250	751.93 147.50	

TOTAL EARNINGS 899.43 14275.30

EMPLOYER'S INFORMATION	FILING STATUS	TAX TYPE	AMOUNT	YTD AMOUNT
AMICO EDUCATIONAL CONCEPTS INC 4731 W 136TH ST CRESTWOOD, IL 60445	S 00	SOC SEC MEDICARE FEDERAL IL	55.76 13.04 98.17 25.63	885.09 206.99 1500.34 425.91

PAY PERIOD 09/13/08 TO 09/26/08
CHECK DATE 10/03/08 CHECK # 7919101391

PERSONAL INFORMATION	TOTAL WITHHOLDINGS	ADJUSTMENTS	AMOUNT	YTD AMOUNT	
DEBRA A HARRIS 2131 W 119TH ST BLUE ISLAND IL 60406 SS# XXX-XX-7332 EMPL# 000045 DEPT# 000100	192.60	MISC DED OTHER COMP	PX401EEPRE PX401ERMAT	44.97 - 35.98	3018.33 150.00 - 78.44 - 62.76

TOTAL ADJUSTMENTS 44.97-

NET PAY 661.86 11028.53

Amico Educational Concepts Inc
0002 P505 0011 000100

PAY TO THE
ORDER OF

DEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

VOID AFTER 180 days

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BANK OF AMERICA
PAYABLE IF DESIRED AT:
ALL BANK OF AMERICA BANKS

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EDDIE AND ELLIOTT

YOUNG & RUBICAM

ITEM

ITEM AMOUNT DEPOSIT TO ACCT # REGULAR 75.94 9.500 721.43
NET 536.81 761538545

FOLD AND HEM				
EARNINGS	HOURS	RATE	AMOUNT	YTD AMOUNT
REGULAR	75.94	9.500	721.43	

EMPLOYEE INFORMATION
AMICO EDUCATIONAL CONCEPTS INC
4731 W 136TH ST
CRESTWOOD IL 60445

TOTAL EARNINGS		721.43	15718.92
FILING STATUS	TAX TYPE	AMOUNT	YTD AMOUNT
S 00	SOC SEC	44.73	974.60
S 00	MEDICARE	10.46	227.92
S 00	FEDERAL	72.80	1646.05
S 00	IL	20.56	467.05

PAY PERIOD 10/11/08 TO 10/24/08
CHECK DATE 10/31/08 CHECK # 7919101440

PERSONAL PERSUASION

DEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

TOTAL WITHHOLDINGS	148.55	3315.62	
ADJUSTMENTS	AMOUNT	YTD AMOUNT	
MISC DED		150.00	
PX401EEPRE	36.07	150.62	
OTHER COMP	PX401ERMAT	28.86	120.51

TOTAL ADJUSTMENTS 36.01

PAY TO THE
ORDER OF

DEBRA A HARRIS
2131 W 119TH ST
BLUE ISLAND IL 60406

VOID AFTER 180 days

VOID

AMOUNT

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 BANK OF AMERICA
 PAYABLE IF DESIRED AT:
 ALL BANK OF AMERICA BANKS

DEPOSIT ACCOUNT 761538545
DEPOSIT AMOUNT *****537.34

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YOUR BANKING		EARNINGS	HOURS	RATE	AMOUNT	YTD AMOUNT
ITEM	AMOUNT	DEPOSIT TO ACCT #	REGULAR	76.02	9.500	722.19
NET	537.34	761538545				

TOTAL EARNINGS		722.19	14997.49
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EMPLOYER INFORMATION		FILING STATUS	TAX TYPE	AMOUNT	YTD AMOUNT
AMICO EDUCATIONAL CONCEPTS INC		SOC SEC	44.78	929.87	
4731 W 136TH ST		MEDICARE	10.47	217.46	
CRESTWOOD, IL 60445		FEDERAL	72.91	1573.25	
		IL	20.58	446.49	

PAY PERIOD 09/27/08 TO 10/10/08
 CHECK DATE 10/17/08 CHECK # 7919101415

TOTAL EARNINGS		722.19	14997.49
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PERSONAL INFORMATION		ADJUSTMENTS	AMOUNT	YTD AMOUNT
DEBRA A HARRIS		MISC DED	150.00 -	
2131 W 119TH ST		PX401EEPRE	114.55 -	
BLUE ISLAND IL 60406		OTHER COMP	28.89	91.65
SS# XXX-XX-7332 EMPL# 000045 DEPT# 000100				

TOTAL ADJUSTMENTS		36.11-
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Payrolls by Paycheck, Inc.

0852 P505 0010 000100

NET PAY

537.34 11565.87

Certificate Number: 00437-ILN-CC-005521253

CERTIFICATE OF COUNSELING

I CERTIFY that on November 29, 2008, at 1:06 o'clock PM MST,

Debra Harris received from

Black Hills Children's Ranch, Inc.,

an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the

Northern District of Illinois, an individual [or group] briefing that complied

with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by telephone.

Date: November 29, 2008 By /s/Linda Randolph

Name Linda Randolph

Title Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Date: 12/05/2008

**Department of the Treasury
Internal Revenue Service**

Page(s):

Attention

From

F DEBRA A HARRIS

M GREENSTREET

F

A
X

Phone (800) 829-0922
FAX

A
X

Phone
FAX (708) 824-0413

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Subject

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UNEMPLOYMENT COMPENSATION:	
TOTAL SOCIAL SECURITY BENEFITS:	\$ 0.00
TAXABLE SOCIAL SECURITY BENEFITS:	\$ 0.00
TAXABLE SOCIAL SECURITY BENEFITS PER COMPUTER:	\$ 0.00
SCH BIC DISQUALIFIED INC COMPUTER:	\$ 0.00
TOTAL INCOME:	\$ 0.00
TOTAL INCOME PER COMPUTER:	\$ 17,447.00
	\$ 17,447.00

Adjustments to Income

EDUCATOR EXPENSES:	
EDUCATOR EXPENSES PER COMPUTER:	\$ 0.00
IRA DEDUCTION:	\$ 0.00
IRA DEDUCTION PER COMPUTER:	\$ 0.00
STUDENT LOAN INTEREST DEDUCTION:	\$ 0.00
STUDENT LOAN INTEREST DEDUCTION PER COMPUTER:	\$ 0.00
TUITION AND FEES DEDUCTION:	\$ 0.00
TUITION AND FEES DEDUCTION PER COMPUTER:	\$ 0.00
TOTAL ADJUSTMENTS:	\$ 0.00
TOTAL ADJUSTMENTS PER COMPUTER:	\$ 0.00
ADJUSTED GROSS INCOME:	\$ 0.00
ADJUSTED GROSS INCOME PER COMPUTER:	\$ 17,447.00
	\$ 17,447.00

Tax and Credits

65-OR-OVER:	
BLIND:	0
SPOUSE 65-OR-OVER:	0
SPOUSE BLIND:	0
EXEMPTION AMOUNT PER COMPUTER:	0
TAXABLE INCOME:	\$ 9,600.00
TAXABLE INCOME PER COMPUTER:	\$ 547.00
TENTATIVE TAX:	\$ 547.00
TENTATIVE TAX PER COMPUTER:	\$ 54.00
CHILD & DEPENDENT CARE CREDIT:	\$ 54.00
CHILD & DEPENDENT CARE CREDIT PER COMPUTER:	\$ 54.00
CREDIT FOR ELDERLY AND DISABLED:	\$ 54.00
CREDIT FOR ELDERLY AND DISABLED PER COMPUTER:	\$ 0.00
EDUCATION CREDIT:	\$ 0.00
EDUCATION CREDIT PER COMPUTER:	\$ 0.00
GROSS EDUCATION CREDIT PER COMPUTER:	\$ 0.00
RETIREMENT SAVINGS CNTRB CREDIT:	\$ 0.00
RETIREMENT SAVINGS CNTRB CREDIT PER COMPUTER:	\$ 0.00
PRIM RET SAV CNTRB: F8880 LN6A:	\$ 0.00
SEC RET SAV CNTRB: F8880 LN6B:	\$ 0.00
CHILD TAX CREDIT:	\$ 0.00
CHILD TAX CREDIT PER COMPUTER:	\$ 0.00
ADOPTION CREDIT: F8839:	\$ 0.00
ADOPTION CREDIT PER COMPUTER:	\$ 0.00
TOTAL CREDITS:	\$ 0.00
TOTAL CREDITS PER COMPUTER:	\$ 54.00
	\$ 54.00

Other Taxes

ADVANCED EARNED INCOME:	\$ 0.00
-------------------------	---------

TOTAL TAX LIABILITY TP FIGURES:

TOTAL TAX LIABILITY TP FIGURES PER COMPUTER:

\$ 0.00

\$ 0.00

Payments

FEDERAL INCOME TAX WITHHELD:

\$ 1,833.00

ESTIMATED TAX PAYMENTS:

\$ 0.00

EARNED INCOME CREDIT:

\$ 3,757.00

EARNED INCOME CREDIT PER COMPUTER:

\$ 3,757.00

PRIOR YEAR EARNED INCOME:

\$ 0.00

FORM 8812 PRIOR YEAR EARNED INCOME CREDIT ELECT IND:

0

FORM 8812 PRIOR YEAR EARNED INCOME CREDIT:

\$ 0.00

NONTAXABLE COMBAT PAY ELECTION:

\$ 0.00

FORM 8812 NONTAXABLE COMBAT PAY:

\$ 0.00

TOT SS/MEDICARE WITHHELD: F8812:

\$ 0.00

FORM 8812 ADDITIONAL CHILD TAX CREDIT:

\$ 0.00

FORM 8812 ADDITIONAL CHILD TAX CREDIT PER COMPUTER:

\$ 967.00

FORM 8812 ADDITIONAL CHILD TAX CREDIT VERIFIED:

\$ 967.00

TOTAL PAYMENTS:

\$ 0.00

TOTAL PAYMENTS PER COMPUTER:

\$ 6,557.00

\$ 6,557.00

Refund or Amount Owed

REFUND AMOUNT:

\$ -6,557.00

APPLIED TO NEXT YEAR'S ESTIMATED TAX:

\$ 0.00

ESTIMATED TAX PENALTY:

\$ 0.00

BAL DUE/OVER PYMT USING TP FIG PER COMPUTER:

\$ -6,557.00

BAL DUE/OVER PYMT USING COMPUTER FIGURES:

\$ -6,557.00

\$ -6,557.00

\$ -6,557.00

\$ -6,557.00

\$ -6,557.00

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PART III DEPENDENT CARE BENEFITS

DEPENDENT CARE EMPLOYER BENEFITS:	\$ 0.00
QUALIFIED EXPENSES EMPLOYER INCURRED:	\$ 0.00
DEPENDENT CARE EXCLUDED BENEFITS:	\$ 0.00
GROSS CHILD CARE CREDIT PER COMPUTER:	\$ 0.00
TOTAL QUALIFYING EXPENSES PER COMPUTER:	\$ 990.00
	\$ 9,000.00

Schedule EIC--Earned Income Credit

QUALIFIED EIC DEPENDENTS:

CHILD 1 2

CHILD'S NAME CNTRL:	
SSN:	DUNC
YEAR OF BIRTH:	346-84-0154
STUDENT/DISABLED:	1986

CHILD 2

CHILD'S NAME CNTRL:	
SSN:	KIDD
YEAR OF BIRTH:	333-90-7042
STUDENT/DISABLED:	1994

Form 8863 - Education Credits (Hope and Lifetime Learning Credits)

PART III - ALLOWABLE EDUCATION CREDITS

GROSS EDUCATION CR PER COMPUTER:	\$ 0.00
TOTAL EDUCATION CREDIT AMOUNT:	\$ 0.00
TOTAL EDUCATION CREDIT AMOUNT PER COMPUTER:	\$ 0.00

This Product Contains Sensitive Taxpayer Data



This Product Contains Sensitive Taxpayer Data

Tax Return Transcript

SSN Provided: 321-54-7332
Tax Period Ending: Dec. 31, 2006

Request Date: 12-05-2008
Response Date: 12-05-2008
IRS Employee Number: QHZLB
Tracking Number: 100035533874

The following items reflect the amount as shown on the return (PR), and the amount as adjusted (PC), if applicable. They do not show subsequent activity on the account.

SSN: 321-54-7332 SPOUSE SSN:
NAME(S) SHOWN ON RETURN: DEBRA A HARRIS
ADDRESS: 2131 W 119TH ST
BLUE ISLAND, IL 60406-1249-990

FILING STATUS: Head of Household
FORM NUMBER: 1040
CYCLE POSTED: 20070408
RECEIVED DATE: Apr. 18, 2007
REMITTANCE: 0.00
EXEMPTION NUMBER: 3
DEPENDENT 1 NAME CTRL: DUNC
DEPENDENT 1 SSN: 346-84-0154
DEPENDENT 2 NAME CTRL: KIDD
DEPENDENT 2 SSN: 333-90-7042
DEPENDENT 3 NAME CTRL:
DEPENDENT 3 SSN:
DEPENDENT 4 NAME CTRL:
DEPENDENT 4 SSN:
PREPARER SSN: P00-48-5025
PREPARER EIN: 20-3710492

Income

WAGES, SALARIES, TIPS, ETC:	\$ 16,977.00
TAXABLE INTEREST INCOME: SCH B:	\$ 0.00
TAX-EXEMPT INTEREST:	\$ 0.00
ORDINARY DIVIDEND INCOME: SCH B:	\$ 0.00
QUALIFIED DIVIDENDS:	\$ 0.00
REFUNDS OF STATE/LOCAL TAXES:	\$ 0.00
ALIMONY RECEIVED:	\$ 0.00
BUSINESS INCOME OR LOSS (Schedule C):	\$ 0.00
BUSINESS INCOME OR LOSS: SCH C PER COMPUTER:	\$ -1,228.00
CAPITAL GAIN OR LOSS: (Schedule D):	\$ -1,228.00
CAPITAL GAINS OR LOSS: SCH D PER COMPUTER:	\$ 0.00
	\$ 0.00

OTHER GAINS OR LOSSES (Form 4797):	
TOTAL IRA DISTRIBUTIONS:	\$ 0.00
TAXABLE IRA DISTRIBUTIONS:	\$ 0.00
TOTAL PENSIONS AND ANNUITIES:	\$ 0.00
TAXABLE PENSION/ANNUITY AMOUNT:	\$ 0.00
RENT/ROYALTY/PARTNERSHIP/ESTATE (Schedule E):	\$ 0.00
RENT/ROYALTY/PARTNERSHIP/ESTATE (Schedule E) PER COMPUTER:	\$ 0.00
RENT/ROYALTY INCOME/LOSS PER COMPUTER:	\$ 0.00
ESTATE/TRUST INCOME/LOSS PER COMPUTER:	\$ 0.00
PARTNERSHIP/S-CORP INCOME/LOSS PER COMPUTER:	\$ 0.00
FARM INCOME OR LOSS (Schedule F):	\$ 0.00
FARM INCOME OR LOSS (Schedule F) PER COMPUTER:	\$ 0.00
UNEMPLOYMENT COMPENSATION:	\$ 0.00
TOTAL SOCIAL SECURITY BENEFITS:	\$ 0.00
TAXABLE SOCIAL SECURITY BENEFITS:	\$ 0.00
TAXABLE SOCIAL SECURITY BENEFITS PER COMPUTER:	\$ 0.00
OTHER INCOME:	\$ 0.00
SCHEDULE EIC SE INCOME PER COMPUTER:	\$ 0.00
SCHEDULE EIC EARNED INCOME PER COMPUTER:	\$ 0.00
SCH EIC DISQUALIFIED INC COMPUTER:	\$ 15,749.00
TOTAL INCOME:	\$ 0.00
TOTAL INCOME PER COMPUTER:	\$ 15,749.00
	\$ 15,749.00

Adjustments to Income

EDUCATOR EXPENSES:	
EDUCATOR EXPENSES PER COMPUTER:	\$ 0.00
RESERVIST AND OTHER BUSINESS EXPENSE:	\$ 0.00
JURY DUTY PAY DEDUCTION:	\$ 0.00
HEALTH SAVINGS ACCT DEDUCTION:	\$ 0.00
HEALTH SAVINGS ACCT DEDUCTION PER COMPT:	\$ 0.00
MOVING EXPENSES: F3903:	\$ 0.00
SELF EMPLOYMENT TAX DEDUCTION:	\$ 0.00
SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER:	\$ 0.00
KEOGH/SEP CONTRIBUTION DEDUCTION:	\$ 0.00
SELF-EMP HEALTH INS DEDUCTION:	\$ 0.00
EARLY WITHDRAWAL OF SAVINGS PENALTY:	\$ 0.00
ALIMONY PAID SSN:	\$ 0.00
ALIMONY PAID:	\$ 0.00
IRA DEDUCTION:	\$ 0.00
IRA DEDUCTION PER COMPUTER:	\$ 0.00
STUDENT LOAN INTEREST DEDUCTION:	\$ 0.00
STUDENT LOAN INTEREST DEDUCTION PER COMPUTER:	\$ 0.00
TUITION AND FEES DEDUCTION:	\$ 0.00
TUITION AND FEES DEDUCTION PER COMPUTER:	\$ 0.00
DOMESTIC PRODUCTION ACTIVITIES DEDUCTION:	\$ 0.00
OTHER ADJUSTMENTS:	\$ 0.00
ARCHER MSA DEDUCTION:	\$ 0.00
ARCHER MSA DEDUCTION PER COMPUTER:	\$ 0.00
TOTAL ADJUSTMENTS:	\$ 0.00
TOTAL ADJUSTMENTS PER COMPUTER:	\$ 0.00
ADJUSTED GROSS INCOME:	\$ 0.00
	\$ 15,749.00

ADJUSTED GROSS INCOME PER COMPUTER:

Tax and Credits	\$ 15,749.00
65-OR-OVER:	
BLIND:	0
SPOUSE 65-OR-OVER:	0
SPOUSE BLIND:	0
STANDARD DEDUCTION PER COMPUTER:	0
ADDITIONAL STANDARD DEDUCTION PER COMPUTER:	\$ 7,550.00
TAX TABLE INCOME PER COMPUTER:	\$ 0.00
EXEMPTION AMOUNT PER COMPUTER:	\$ 8,199.00
TAXABLE INCOME:	\$ 9,900.00
TAXABLE INCOME PER COMPUTER:	\$ 0.00
TOTAL POSITIVE INCOME PER COMPUTER:	\$ 0.00
TENTATIVE TAX:	\$ 16,977.00
TENTATIVE TAX PER COMPUTER:	\$ 0.00
FORM 8814 ADDITIONAL TAX AMOUNT:	\$ 0.00
TAX ON INCOME LESS SOC SEC INCOME PER COMPUTER:	\$ 0.00
FORM 6251 ALTERNATIVE MINIMUM TAX:	\$ 0.00
FORM 6251 ALTERNATIVE MINIMUM TAX PER COMPUTER:	\$ 0.00
FOREIGN TAX CREDIT:	\$ 0.00
FOREIGN TAX CREDIT PER COMPUTER:	\$ 0.00
FOREIGN INCOME EXCLUSION PER COMPUTER:	\$ 0.00
CHILD & DEPENDENT CARE CREDIT:	\$ 0.00
CHILD & DEPENDENT CARE CREDIT PER COMPUTER:	\$ 0.00
CREDIT FOR ELDERLY AND DISABLED:	\$ 0.00
CREDIT FOR ELDERLY AND DISABLED PER COMPUTER:	\$ 0.00
EDUCATION CREDIT:	\$ 0.00
EDUCATION CREDIT PER COMPUTER:	\$ 0.00
GROSS EDUCATION CREDIT:	\$ 0.00
RETIREMENT SAVINGS CNTRB CREDIT:	\$ 0.00
RETIREMENT SAVINGS CNTRB CREDIT PER COMPUTER:	\$ 0.00
PRIM RET SAV CNTRB: F8880 LNE6A:	\$ 0.00
SEC RET SAV CNTRB: F8880 LNE6B:	\$ 0.00
TOTAL RETIREMENT SAVINGS CONTRIBUTION: F8880 CMPTR:	\$ 0.00
RESIDENTIAL ENERGY CREDIT:	\$ 0.00
RESIDENTIAL ENERGY CREDIT PER COMPUTER:	\$ 0.00
CHILD TAX CREDIT:	\$ 0.00
CHILD TAX CREDIT PER COMPUTER:	\$ 0.00
F8396, F8659 and F8839 Credit:	\$ 0.00
FORM 3800 GENERAL BUSINESS CREDITS:	\$ 0.00
FORM 3800 GENERAL BUSINESS CREDITS PER COMPUTER:	\$ 0.00
FORM 1040C CREDIT:	\$ 0.00
PRIOR YR MIN TAX CREDIT: F8801:	\$ 0.00
PRIOR YR MIN TAX CREDIT: F8801 PER COMPUTER:	\$ 0.00
TENTATIVE EMPOWERMENT ZONE CREDIT: F8844:	\$ 0.00
EMPOWERMENT ZONE CREDIT: F8844:	\$ 0.00
OTHER CREDITS:	\$ 0.00
TOTAL CREDITS:	\$ 0.00
TOTAL CREDITS PER COMPUTER:	\$ 0.00
INCOME TAX AFTER CREDITS PER COMPUTER:	\$ 0.00

Other Taxes

SE TAX:	\$ 0.00
SE TAX PER COMPUTER:	\$ 0.00
SOCIAL SECURITY AND MEDICARE TAX ON UNREPORTED TIPS:	\$ 0.00
SOCIAL SECURITY AND MEDICARE TAX ON UNREPORTED TIPS PER COMPUTER:	\$ 0.00
TAX ON QUALIFIED PLANS F5329 (PR):	\$ 0.00
TAX ON QUALIFIED PLANS F5329 PER COMPUTER:	\$ 0.00
IRAF TAX PER COMPUTER:	\$ 0.00
TP TAX FIGURES (REDUCED BY IRAF) PER COMPUTER:	\$ 0.00
IMF TOTAL TAX (REDUCED BY IRAF) PER COMPUTER:	\$ 0.00
ADVANCED EARNED INCOME:	\$ 0.00
UNPAID FICA ON REPORTED TIPS:	\$ 0.00
FORM 4970 ACCUMULATED DISTRIBUTION OF TRUSTS:	\$ 0.00
RECAPTURE TAX: F8611:	\$ 0.00
HOUSEHOLD EMPLOYMENT TAXES:	\$ 0.00
HOUSEHOLD EMPLOYMENT TAXES PER COMPUTER:	\$ 0.00
RECAPTURE TAXES:	\$ 0.00
TOTAL ASSESSMENT PER COMPUTER:	\$ 0.00
TOTAL TAX LIABILITY TP FIGURES:	\$ 0.00
TOTAL TAX LIABILITY TP FIGURES PER COMPUTER:	\$ 0.00

Payments

FEDERAL INCOME TAX WITHHELD:	
ESTIMATED TAX PAYMENTS:	\$ 1,752.00
EARNED INCOME CREDIT:	\$ 0.00
EARNED INCOME CREDIT PER COMPUTER:	\$ 4,343.00
NONTAXABLE COMBAT PAY ELECTION:	\$ 4,343.00
FORM 8812 NONTAXABLE COMBAT PAY:	\$ 0.00
EXCESS SOCIAL SECURITY & RRTA TAX WITHHELD:	\$ 0.00
TOT SS/MEDICARE WITHHELD: F8812:	\$ 0.00
FORM 8812 ADDITIONAL CHILD TAX CREDIT:	\$ 0.00
FORM 8812 ADDITIONAL CHILD TAX CREDIT PER COMPUTER:	\$ 667.00
FORM 8812 ADDITIONAL CHILD TAX CREDIT VERIFIED:	\$ 667.00
AMOUNT PAID WITH FORM 4868:	\$ 0.00
FORM 2439 REGULATED INVESTMENT COMPANY CREDIT:	\$ 0.00
FORM 4136 CREDIT FOR FEDERAL TAX ON FUELS:	\$ 0.00
FORM 4136 CREDIT FOR FEDERAL TAX ON FUELS PER COMPUTER:	\$ 0.00
HEALTH COVERAGE TX CR: F8885:	\$ 0.00
FEDERAL PHONE EXCISE TAX CREDIT PER COMPUTER:	\$ 0.00
FORM 8913 PHONE EXCISE TAX PER COMPUTER:	\$ 50.00
FEDERAL PHONE EXCISE TAX CREDIT AMOUNT:	\$ 0.00
FEDERAL PHONE EXCISE TAX CREDIT VERIFIED AMOUNT:	\$ 50.00
TOTAL PAYMENTS:	\$ 0.00
TOTAL PAYMENTS PER COMPUTER:	\$ 6,812.00

Refund or Amount Owed

REFUND AMOUNT:	
APPLIED TO NEXT YEAR'S ESTIMATED TAX:	\$ -6,812.00
ESTIMATED TAX PENALTY:	\$ 0.00
TAX ON INCOME LESS STATE REFUND PER COMPUTER:	\$ 0.00
BAL DUE/OVER PYMT USING TP FIG PER COMPUTER:	\$ 0.00
	\$ -6,812.00

SSN:

333-90-7042

YEAR OF BIRTH:

1994

STUDENT/DISABLED:

0

**Form 8863 - Education Credits (Hope and Lifetime Learning
Credits)**

PART III - ALLOWABLE EDUCATION CREDITS

GROSS EDUCATION CR PER COMPUTER:

\$ 0.00

TOTAL EDUCATION CREDIT AMOUNT:

\$ 0.00

TOTAL EDUCATION CREDIT AMOUNT PER COMPUTER:

\$ 0.00

This Product Contains Sensitive Taxpayer Data



This Product Contains Sensitive Taxpayer Data

Tax Return Transcript

Request Date: 12-05-2008
Response Date: 12-05-2008
IRS Employee Number: QW2LB
Tracking Number: 100035533874

SSN Provided: 321-54-7332
Tax Period Ending: Dec. 31, 2007

The following items reflect the amount as shown on the return (PR), and the amount as adjusted (PC), if applicable. They do not show subsequent activity on the account.

SSN: 321-54-7332 SPOUSE SSN:
NAME(S) SHOWN ON RETURN: DEBRA A HARRIS
ADDRESS: 2131 W 119TH ST
BLUE ISLAND, IL 6046-1249-990

FILING STATUS: Head of Household
FORM NUMBER: 1040A
CYCLE POSTED: 20080408
RECEIVED DATE: Apr.15, 2008
REMITTANCE: 0.00
EXEMPTION NUMBER: 3
DEPENDENT 1 NAME CTRL: DUNC
DEPENDENT 1 SSN: 346-94-0154
DEPENDENT 2 NAME CTRL: KIDD
DEPENDENT 2 SSN: 333-90-7042
DEPENDENT 3 NAME CTRL:
DEPENDENT 3 SSN:
DEPENDENT 4 NAME CTRL:
DEPENDENT 4 SSN:
PREPARER SSN: P00-48-5025
PREPARER ETIN: 20-3710492

Income

WAGES, SALARIES, TIPS, ETC:	\$ 13,118.00
TAXABLE INTEREST INCOME:	\$ 0.00
TAX-EEXEMPT INTEREST:	\$ 0.00
ORDINARY DIVIDEND INCOME: SCH B:	\$ 0.00
QUALIFIED DIVIDENDS:	\$ 0.00
CAPITAL GAIN OR LOSS: (Schedule D):	\$ 0.00
CAPITAL GAINS OR LOSS: SCH D PER COMPUTER:	\$ 0.00
TOTAL IRA DISTRIBUTIONS:	\$ 0.00
TAXABLE IRA DISTRIBUTIONS:	\$ 0.00
TOTAL PENSIONS AND ANNUITIES:	\$ 0.00
TAXABLE PENSION/ANNUITY AMOUNT:	\$ 0.00

Payments

FEDERAL INCOME TAX WITHHELD:	\$ 1,407.00
ESTIMATED TAX PAYMENTS:	\$ 0.00
EARNED INCOME CREDIT:	\$ 0.00
EARNED INCOME CREDIT PER COMPUTER:	\$ 4,716.00
NONTAXABLE COMBAT PAY ELECTION:	\$ 4,716.00
FORM 8812 NONTAXABLE COMBAT PAY:	\$ 0.00
TOT SS/MEDICARE WITHHELD: F8812:	\$ 0.00
FORM 8812 ADDITIONAL CHILD TAX CREDIT:	\$ 0.00
FORM 8812 ADDITIONAL CHILD TAX CREDIT PER COMPUTER:	\$ 205.00
FORM 8812 ADDITIONAL CHILD TAX CREDIT VERIFIED:	\$ 205.00
TOTAL PAYMENTS:	\$ 0.00
TOTAL PAYMENTS PER COMPUTER:	\$ 6,328.00
	\$ 6,328.00

Refund or Amount Owed

REFUND AMOUNT:	\$ -6,328.00
APPLIED TO NEXT YEAR'S ESTIMATED TAX:	\$ 0.00
ESTIMATED TAX PENALTY:	\$ 0.00
BAL DUE/OVER PYMT USING TF FIG PER COMPUTER:	\$ -6,328.00
BAL DUE/OVER PYMT USING COMPUTER FIGURES:	\$ -6,328.00
FORM 8888 TOTAL DEPOSIT PER COMPUTER:	\$ 0.00

Third Party Designee

THIRD PARTY DESIGNEE ID NUMBER:	
AUTHORIZATION INDICATOR:	0
THIRD PARTY DESIGNEE NAME:	

Schedule EIC--Earned Income Credit

QUALIFIED EIC DEPENDENTS:	2
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CHILD 1

CHILD'S NAME CNTRL:	DUNC
SSN:	346-84-0154
YEAR OF BIRTH:	1986
STUDENT/DISABLED:	1

CHILD 2

CHILD'S NAME CNTRL:	KIDD
SSN:	333-90-7042
YEAR OF BIRTH:	1994
STUDENT/DISABLED:	0

Form 8863 - Education Credits (Hope and Lifetime Learning Credits)

PART III - ALLOWABLE EDUCATION CREDITS

GROSS EDUCATION CR PER COMPUTER:	\$ 0.00
TOTAL EDUCATION CREDIT AMOUNT:	\$ 0.00
TOTAL EDUCATION CREDIT AMOUNT PER COMPUTER:	\$ 0.00

This Product Contains Sensitive Taxpayer Data.

UNEMPLOYMENT COMPENSATION:	\$ 0.00
TOTAL SOCIAL SECURITY BENEFITS:	\$ 0.00
TAXABLE SOCIAL SECURITY BENEFITS:	\$ 0.00
TAXABLE SOCIAL SECURITY BENEFITS PER COMPUTER:	\$ 0.00
SCH EIC DISQUALIFIED INC COMPUTER:	\$ 0.00
TOTAL INCOME:	\$ 13,118.00
TOTAL INCOME PER COMPUTER:	\$ 13,118.00

Adjustments to Income

EDUCATOR EXPENSES:	\$ 0.00
EDUCATOR EXPENSES PER COMPUTER:	\$ 0.00
IRA DEDUCTION:	\$ 0.00
IRA DEDUCTION PER COMPUTER:	\$ 0.00
STUDENT LOAN INTEREST DEDUCTION:	\$ 0.00
STUDENT LOAN INTEREST DEDUCTION PER COMPUTER:	\$ 0.00
TUITION AND FEES DEDUCTION:	\$ 0.00
TUITION AND FEES DEDUCTION PER COMPUTER:	\$ 0.00
TOTAL ADJUSTMENTS:	\$ 0.00
TOTAL ADJUSTMENTS PER COMPUTER:	\$ 0.00
ADJUSTED GROSS INCOME:	\$ 13,118.00
ADJUSTED GROSS INCOME PER COMPUTER:	\$ 13,118.00

Tax and Credits

65-OR-OVER:	0
BLIND:	0
SPOUSE 65-OR-OVER:	0
SPOUSE BLIND:	0
EXEMPTION AMOUNT PER COMPUTER:	\$ 10,200.00
TAXABLE INCOME:	\$ 0.00
TAXABLE INCOME PER COMPUTER:	\$ 0.00
TENTATIVE TAX:	\$ 0.00
TENTATIVE TAX PER COMPUTER:	\$ 0.00
CHILD & DEPENDENT CARE CREDIT:	\$ 0.00
CHILD & DEPENDENT CARE CREDIT PER COMPUTER:	\$ 0.00
CREDIT FOR ELDERLY AND DISABLED:	\$ 0.00
CREDIT FOR ELDERLY AND DISABLED PER COMPUTER:	\$ 0.00
EDUCATION CREDIT:	\$ 0.00
EDUCATION CREDIT PER COMPUTER:	\$ 0.00
GROSS EDUCATION CREDIT PER COMPUTER:	\$ 0.00
RETIREMENT SAVINGS CNTRB CREDIT:	\$ 0.00
RETIREMENT SAVINGS CNTRB CREDIT PER COMPUTER:	\$ 0.00
PRIM RET SAV CNTRB: F8880 LNGA:	\$ 0.00
SEC RET SAV CNTRB: F8880 LNGB:	\$ 0.00
CHILD TAX CREDIT:	\$ 0.00
CHILD TAX CREDIT PER COMPUTER:	\$ 0.00
TOTAL CREDITS:	\$ 0.00
TOTAL CREDITS PER COMPUTER:	\$ 0.00

Other Taxes

ADVANCED EARNED INCOME:	\$ 0.00
TOTAL TAX LIABILITY TP FIGURES:	\$ 0.00
TOTAL TAX LIABILITY TP FIGURES PER COMPUTER:	\$ 0.00

IN RE:

Harris, Debra A

Case No. _____

Chapter 13 _____

Debtor(s)

DECLARATION REGARDING ELECTRONIC FILING

Signed by Debtor(s) or Corporate Representative
To Be Used When Filing over the Internet

PART I - DECLARATION OF PETITIONER
A. To be completed in all cases.

Date: November 29, 2008

I(We) Debra A Harris

and

officer, partner, or member, hereby declare under penalty of perjury that the information I(we) have given my (our) attorney, including correct social security number(s) and the information provided in the electronically filed petition, statements, schedules, and if applicable, application to pay filing fee in installments, is true and correct. I(we) consent to my(our) attorney sending the petition, statements, schedules, and this DECLARATION to the United States Bankruptcy Court. I(we) understand that this DECLARATION must be filed with the Clerk in addition to the petition. I(we) understand that failure to file this DECLARATION will cause this case to be dismissed pursuant to 11 U.S.C. sections 707(a) and 105.

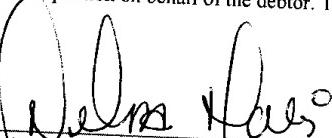
B. To be checked and applicable only if the petitioner is an individual (or individuals) whose debts are primarily consumer debts and who has (or have) chosen to file under chapter 7.

I(we) am(are) aware that I(we) may proceed under chapter 7, 11, 12, or 13 of Title 11 United States Code; I(we) understand the relief available under each such chapter; I(we) choose to proceed under chapter 7; and I(we) request relief in accordance with chapter 7.

C. To be checked and applicable only if the petition is a corporation, partnership, or limited liability entity.

I declare under penalty of perjury that the information provided in this petition is true and correct and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter specified in the petition.

Signature:


(Debtor or Corporate Officer, Partner or Member)

Signature:

(Joint Debtor)